

Program Memorandum Intermediaries

Department of Health and
Human Services (DHHS)
HEALTH CARE FINANCING
ADMINISTRATION (HCFA)

Transmittal A-00-72

Date: OCTOBER 3, 2000

This is a technical correction to Program Memoranda A-00-42, CR 1259, dated July 26, 2000 and A-00-61, CR 1307, dated September 6, 2000.

CHANGE REQUEST 1376

**SUBJECT: Technical Corrections to Coding Information for Hospital Outpatient
Prospective Payment System (OPPS)**

Introduction

This Program Memorandum (PM) contains a list of long descriptor corrections for devices eligible for transitional pass-through payments under the OPSS. **The long descriptors in this PM supersede any previously published long descriptors for each C-code listed below.** Unless otherwise indicated, the effective date for the items in this PM is October 1, 2000.

The Outpatient Code Editor and PRICER currently contain the codes included in this document. However, fiscal intermediaries must revise the long descriptors to the HCPCS file in their internal claims processing systems to include the trade/brand names and/or model numbers to the specific assigned C-code. Note that the long descriptors for some of the codes listed below may change effective January 1, 2001.

All of the C-codes included in this file are used exclusively for services paid under the outpatient PPS and may **not** be used to bill services paid under other Medicare payment systems. The listing of HCPCS codes contained in this instruction does not assure coverage of the specific item or service in a given case. To be eligible for pass-through and new device technology payments, the items contained in this document must be considered reasonable and necessary.

HCPCS

CODE

Long Descriptors for Pass-Through Devices

C1000	Closure, arterial vascular device, Perclose Closer Arterial Vascular Closure Device, Prostar Arterial Vascular Closure Device, Vascular Solutions Duett Sealing Device (Model 1000)
C1036	Port/reservoir, venous access device, Vaxcel Implantable Vascular Access System, R Port Premier Vascular Access System
C1040	Stent, self-expandable for creation of intrahepatic shunts, Wallstent Transjugular Intrahepatic Portosystemic Shunt (TIPS) with Unistep Plus Delivery System (40/42/60/68 mm in length), Wallstent RP TIPS Endoprosthesis with Unistep Plus Delivery System (42/68 mm in length) Note: Only the Wallstent RP TIPS Endoprosthesis with Unistep Plus Delivery System is effective October 1, 2000. The Wallstent TIPS Endoprosthesis with Unistep Plus Delivery System was effective August 1, 2000.
C1100	Guide wire, percutaneous transluminal coronary angioplasty, Medtronic AVE GT1 Guide Wire, Medtronic AVE GT 2 Fusion Guide Wire
C1371	Stent, biliary, Symphony Nitinol Stent Transhepatic Biliary System, Symphony Nitinol Biliary Stent with Radiopaque Markers
C1803	Brachytherapy seed, Best Industries Iodine 125, Nycomed Amersham I-125 (OncoSeed, Rapid Strand)

HCFA- Pub-60A

C1859	DuraDerm Acellular Allograft, per 21, 24 or 28 square centimeters, Dermagraft, per 37.5 square centimeters
C1937	Catheter, Synergy Balloon Dilatation Catheter, Explorer ST 6F
C2002	Catheter, Irvine Inquiry Steerable Electrophysiology 5F Catheter, Cardiac Pathways RV Reference Catheter, Cardiac Pathways 7F Radii Catheter
C2004	Catheter, electrophysiology, EP Deflectable Tip Catheter, (Octapolar Small Anatomy Models only)
C2005	Catheter, electrophysiology, EP Deflectable Tip Catheter (Hexapolar Small Anatomy Models only)
C2006	Catheter, electrophysiology, EP Deflectable Tip Catheter (Decapolar Small Anatomy Models only)
C2008	Catheter, electrophysiology, Irvine Luma-Cath 7F Steerable Electrophysiology Catheter Model 81910, Model 81915, Model 81912, Cardiac Pathways CS Reference Catheter
C2009	Catheter, electrophysiology, Irvine Luma-Cath 7F Steerable Electrophysiology Catheter Model 81920, Cardiac Pathways 7F Radii Catheter with Tracking
C2010	Catheter, electrophysiology, Cordis Fixed Curve Catheter (Decapolar Small Anatomy Models only, Hexapolar Small Anatomy Models only, Octapolar Small Anatomy Models only, Quadrapolar Small Anatomy Models only), Bard Viking Fixed Curve Catheter (Bipolar, Quadrapolar, ASP Models only)
C2011	Catheter, electrophysiology, Cordis Deflectable Tip Catheter (Quadrapolar Small Anatomy Models only)
C2012	Catheter, ablation, Biosense Webster Celsius Braided Tip Ablation Catheter, Biosense Webster Celsius 5mm Temperature Ablation Catheter, Biosense Webster Celsius Temperature Sensing Diagnostic/Ablation Tip Catheter (formerly listed as Biosense Webster Celsius II Temperature Sensing Diagnostic/Ablation Tip Catheter)
C2014	Catheter, ablation, Biosense Webster Celsius II Asymmetrical Ablation Catheter, Cardiac Pathways Chilli Cooled Ablation Catheter Standard Curve (Model 3005) or Large Curve (Model 3006)
C2017	Catheter, ablation, Navi-Star Diagnostic/Ablation Deflectable Tip Catheter, Cardiac Pathways Chilli Cooled Ablation Catheter 41422, 41442, 45422, 45442, 43422, 43442
C2020	Catheter, ablation, Blazer II XP, Blazer II 6F, Blazer II High Torque
C2609	Catheter, Flexima Biliary Drainage Catheter with Locking Pigtail, Flexima Biliary Drainage Catheter with Twist Loc Hub, Flexima Biliary Drainage Catheters with Temp Tip
C5280	Stent, ureteral, Bard Inlay Double Pigtail Ureteral Stent, Boston Scientific Contour Soft Percuflex Stent with Hydroplus Coating (Braided), Contour Soft Percuflex Stent with Hydroplus Coating, Contour VL Variable Length Percuflex Stent with Hydroplus Coating, Percuflex Plus Stent with Hydroplus Coating, Percuflex Stent (Braided)
C5283	Stent, self-expandable for creation of intrahepatic shunts, Wallstent Transjugular Intrahepatic Portosystemic Shunt (TIPS) with Unistep Plus Delivery System (90/94 mm in length), Wallstent RP TIPS Endoprosthesis with Unistep Plus Delivery System (94 mm in length)

Note: Only the Wallstent **RP** TIPS Endoprosthesis with Unistep Plus Delivery System is effective October 1, 2000. The Wallstent TIPS with Unistep Plus Delivery System was effective August 1, 2000.

HCPCS C-code	Long Descriptors for New Device Technology Ambulatory Payment Classifications (APC)s	APC
C8522	Stent, biliary, PALMAZ Balloon Expandable Stent , Spiral Z Biliary Metal Expandable Stent, Za Biliary Metal Expandable Stent	990
C8529	Ismus Cath Deflectable 20-Pole Catheter/Crista Cath II Deflectable 20-Pole Catheter	990
C8532	Stent, esophageal, UltraFlex Esophageal Stent System, Esophageal Z Metal Expandable Stent with Dua Anti-Reflux Valve, Esophageal Z Metal Expandable Stent with Uncoated Flanges	991

NOTE: The HCPCS code assigned to the device(s) listed in this PM may be used only for that specific device. An already-assigned HCPCS C-code may not be substituted for a different brand/trade name device not listed in this PM, even if it is the same type of device.

Immediately forward this PM electronically to your providers and place it on your website. This PM should also be distributed with your next regularly scheduled bulletin.

The *effective* date of this PM is October 1, 2000. This date applies to the *date of service* performed on or after October 1, 2000.

The *implementation* date of this PM is October 17, 2000.

This PM should be discarded after October 1, 2001.

These instructions should be implemented within your current operating budget.

For questions regarding the devices listed in this PM, contact Marjorie Baldo (MBaldo@hcfa.gov) at (410) 786-4617.